

Work Order ID 88501

88501

Page 1

August-02-12 11:09:04 AM

Item ID: D3672-7 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Phenolic Washer
 Start Date: 7/10/12 Start Qty: 500.00 ***500*** Cust Item ID:
 Required Date: 8/10/12 Req'd Qty: 500.00 ***500*** Customer:
 Reference:

Approvals: Process Plan: MLJ Date: 12/08/09 Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D3672	Rev C								

100 PURCHASING 0.00
100
 Purchasing Memo 0.00
 Purchasing Issue P/O: 17645
 Purchase Part Number: MM .562 OD X .328 ID X .031 +/- .002
 Supplier: HASKINS INDUSTRIAL
 Certificate of conformity is required
CX 12/08/09 500

110 Receive & Inspect for Damage & Mat'l Certs 0.00
110
 Packaging Memo 0.00
 Packaging Ensure certificate of conformity is attached
500x SP 128-15

120 QC6- Inspect dimensions to drawing 0.00
120
 QC Memo 0.00
 Quality Control
(DAS 16 8-09) 12/08/15
(+500) 08/20/19

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
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Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Work Order ID 88501

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Item ID: D3672-7 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Phenolic Washer
 Start Date: 7/10/12 Start Qty: 500.00 ***500*** Cust Item ID:
 Required Date: 8/10/12 Req'd Qty: 500.00 ***500*** Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	Identify as per dwg & Stock Location: 062	0.00	SL	SD	12/08/16				
130									
Packaging	Memo	0.00							
Packaging									
140	QC21- Final Inspection - Work Order Release	0.00							
140									
QC	Memo	0.00							
Quality Control									

MLJ 12/08/16

MLJ 12/08/16

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Picklist Print

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Page 1

Work Order ID: 88501

Parent Item: D3672-7

Parent Item Name: Phenolic Washer

Start Date: 7/10/12

Required Date: 8/10/12

Start Qty: 500.00

Required Qty: 500.00

Comments: IPP Rev:A New Issue 07-10-30 DD Verified By:ec
IPP Rev:B ECN 1056 07-11-13 DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D3672-7P WASHER		Purchased	No			110	Each	0.0000	1	500			
											500x SP 12-8-15		

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

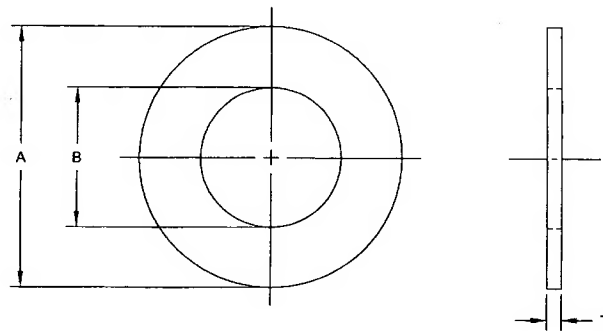
Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

SPECIFICATION CONTROL DRAWING



D3672-X PHENOLIC WASHER

Dart P/N	A (IN)	B (IN)	T (IN)	SUPPLIER P/N	REPLACES
D3672-1	0.437	0.210	0.031	MM .437OD x .210ID x .031 +/- .002 PHENOLIC FLAT WASHER	NAS1515H3L
D3672-3	0.500	0.267	0.031	MM .500OD x .267ID x .031 +/- .002 PHENOLIC FLAT WASHER	NAS1515H4L
D3672-5	0.562	0.326	0.062	MM .562OD x .326ID x .062 +/- .002 PHENOLIC FLAT WASHER	NAS1515H5
D3672-7	0.562	0.328	0.031	MM .562OD x .328ID x .031 +/- .002 PHENOLIC FLAT WASHER	NAS1515H5L
D3672-9	0.625	0.390	0.031	MM .625OD x .390ID x .031 +/- .002 PHENOLIC FLAT WASHER	NAS1515H6L
D3672-11	0.750	0.453	0.031	MM .750OD x .453ID x .031 +/- .002 PHENOLIC FLAT WASHER	NAS1515H7L
D3672-13	0.875	0.515	0.031	MM .875OD x .515ID x .031 +/- .002 PHENOLIC FLAT WASHER	NAS1515H8L



NOTES:

- 1) MATERIAL: PHENOLIC. PURCHASE HASKINS INDUSTRIAL INC. P/N PER TABLE (IN QUANTITIES OF 1000)
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: NONE
- 7) WEIGHT: N/A

SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT

WITHOUT NOTICE
WORK ORDER

NO. 88501 MCT

12/08/09

RELEASED
2009-12-16

C	REDRAW, ADD -13 (ZN A8-1), PAR 09-038	CP	09.11.04
B	ADD -5/-7/-9/-11	DC	07.10.09
A	NEW ISSUE	DC	07.08.28
REV.	DESCRIPTION	BY	DATE
DESIGN	DC	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	9P		
CHECKED	AS	DRAWING NO.	REV. C
MFG. APPR.	AS	D3672	SHEET 1 OF 1
APPROVED	AS	TITLE	SCALE
DE APPR.	AS	PHENOLIC WASHER	NTS
DATE	09.11.04	COPYRIGHT © 2007 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

HASKINS INDUSTRIAL INC.
5-52 ANTARES DRIVE

** PACKING SLIP **

Order # 1245671.00

NEPEAN, ONTARIO K2E 7Z1
TEL (613)723-8800 FAX (613)723-8806

Order Date 08/10/12

Page 1 of 1

Sold To: DART AEROSPACE LTD.
1270 ABERDEEN STREET
HAWKESBURY
ON
K6A 1K7

Ship To: DART AEROSPACE LTD.
1270 ABERDEEN STREET
HAWKESBURY
ON
K6A 1K7

* Reprint *

Cust Phone #
(613) 632-5200

Warehouse
OTTAWA

F.O.B.
DEST

Taken By
Sylvie 613-723-880

Cust #	Customer P/O #	Required	Orig Order	Slsm	Ship Via	Terms
05168	17645	08/11/12	1245671.00	PL	DICOM	NET 30

Ln#	Bin #	Order UM	Ship	B/O	Product	Description
-----	-------	----------	------	-----	---------	-------------

1	CAB810	500 EA	500		MMS-D3672-3	.500 X .267 X .031 +/- .002 WASHER, PHENO
2	CAB810	500 EA	500		MMS-D3672-7	.562 X .328 X .031 +/- .002 WASHER, PHENO
3		1 EA	1		KEO1X1 3093623	KSOM150OF5345F3 FACEMILL
4 *		2 EA	0	2	SO1X1	604-006 #10208 MITEE BITE 8/PKG
5		2 EA	0	2	SGS1X1	34811 1" SER43C S-CARB ENDMILL
6		100 C	0	100	SP1X100	238-805 DOWEL PIN
7		2 EA	0	2	DB1X1	130-0250-402 1/4" 4FL BN CARB EM
8		2 EA	2		KEO1X1 1257632	BNEC250S2150 K600 CARB ENDMILL

PLEASE NOTE:

1. NO RETURNS WITHOUT PRIOR AUTHORIZATION
 2. ALL SHORTAGE CLAIMS MUST BE WITHIN 10 DAYS
 3. BO CODE: BO = QTY NOT SHIPPED IS BACK-ORDERED
- CL= QTY NOT SHIPPED WAS CANCELLED
SC= ITEM CONSIDERED COMPLETE - NO B/O CREATED

FILL PACK DATE
Printed on 2012-08-13 at 9:09

8-13-12



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID PO17645

Purchase Order Date 8/09/12

PO Print Date 8/13/12

Page Number 1 of 2

Order From :

VC-HAS001

HASKINS INDUSTRIAL
5-52 ANTARES DRIVE
NEPEAN, ON K2E 7Z1
CA

Contact Name

Vendor Phone

613 723 8800

Vendor Fax

613 723 8806

Vendor Account Nbr

Buyer

Chantal Lavoie

Requisition Nbr

Tax Resale Nbr

10127-2607

Terms

Net 30

Currency

CAD

FOB

Destination-Collect

Ship To :

DART AEROSPACE LTD

1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

RECEIVED

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	238-805	SS DOWEL PIN 3/4" LONG	8/14/12 Yes	100.00 Each	Dicom	\$0.1500	\$15.00
		Special Inst:	AS PER DWG D3966 REV. A B88575				
2	D3672-3P	WASHER	8/14/12 Yes	✓ 500.00 Each	Dicom	\$0.3229	\$161.45
		Special Inst:	AS PER DWG D3672 REV. C B88441				
3	D3672-7P	WASHER	8/14/12 Yes	✓ 500.00 Each	Dicom	\$0.3200	\$160.00
		Special Inst:	AS PER DWG D3672 REV. C B88501				

CERTIFICATE OF CONFORMITY
REQ'D UPON DELIVERY

No substitution or deviation without
consent.

Certificate of Conformity or Material
Certification required - YES NO

Change Nbr: 3

Change Date: 8/13/12